

TRIBE-Critical Illness Product Summary

Important:

This is a sample of the policy document. To determine the precise terms, conditions, and exclusions of your cover, please refer the actual policy and any endorsement issued to you upon payment of premium for the policy.

Product Information

This TRIBE-Critical Illness (TRIBE-CI) policy is a health insurance plan that provide financial protection if the insured person is diagnosed for the first time by a registered medical practitioner with any one of the critical illnesses during the policy term. If the insured person is diagnosed with a critical illness (except angioplasty and other invasive treatment for coronary artery) for the first time by a registered medical practitioner during the policy term, we will pay the sum assured in one lump sum provided that the insured person survives a period of seven (7) days from the date of diagnosis of the critical illness. The policy will end after we make this payment.

If the insured person undergoes angioplasty and other invasive treatment for coronary artery during the policy term, we will pay 10% of the sum assured if this policy is valid and in force as at the date that the insured person is diagnosed by a registered medical practitioner with the medical condition that led to the angioplasty and other invasive treatment for coronary artery, provided that the total sum assured that we will pay will not exceed S\$25,000 for the same claim event. After this payment, we will reduce the sum assured for this policy accordingly.

The Total Distribution Cost of this plan is between 0% - 8% of the premium. Such costs include cash payments in the form of commission, costs of benefits and services paid to the distribution channel. Please note that the Total Distribution Cost is not an additional cost to the policyholder; it has already been allowed for in the calculating the premium.

This is a short-term health policy and the insurer is not required to renew this policy. The insurer may terminate this policy by giving you 30 days' notice in writing.

This policy is not a Medisave-approved policy and you may not use Medisave to pay the premium for this policy. Please refer to Appendix 1 for the table of cover and premiums.

The list of critical illnesses[^] covered under this plan are:

1. Major cancer
2. Heart attack of specified severity
3. Stroke with permanent neurological deficit
4. Coronary artery by-pass surgery
5. End stage kidney failure
6. Irreversible aplastic anaemia
7. End stage lung disease
8. End stage liver failure
9. Coma
10. Deafness (Irreversible loss of hearing)
11. Open chest heart valve surgery
12. Irreversible loss of speech
13. Major burns
14. Major organ / bone marrow transplantation
15. Multiple sclerosis
16. Muscular dystrophy
17. Idiopathic parkinson's disease

18. Open chest surgery to aorta
19. Alzheimer's disease / severe dementia
20. Fulminant hepatitis
21. Motor neurone disease
22. Primary pulmonary hypertension
23. HIV due to blood transfusion and occupationally acquired HIV
24. Benign brain tumour
25. Severe encephalitis
26. Severe bacterial meningitis
27. Angioplasty & other invasive treatment for coronary artery
28. Blindness (Irreversible loss of sight)
29. Major head trauma
30. Paralysis (Irreversible loss of use of limbs)
31. Terminal illness
32. Progressive scleroderma
33. Persistent vegetative state (Apallic syndrome)
34. Systemic lupus erythematosus with lupus nephritis
35. Other serious coronary artery disease
36. Poliomyelitis
37. Loss of independent existence

Please refer to the policy contract for the full definitions of the critical illnesses and the circumstances in which a claim can be made.

^The Life Insurance Association Singapore (LIA) has standard Definitions for 37 severe-stage Critical Illnesses (Version 2019). These Critical Illnesses fall under Version 2019. You may refer to www.lia.org.sg for the standard Definitions (Version 2019).

Key Product Provisions

The following are some key provisions found in the policy contract of this plan. This is only a brief summary and you are advised to refer to the actual terms and conditions in the contract. If you need clarification, please do not hesitate to contact us via hello.tribe@income.com.sg.

1. Eligibility

This policy is only available to you if:

- (i) you
 - are a Singapore Citizen or Singapore Permanent Resident;
 - are age between 18 years old and 61 years old; and
 - have fully paid your premium.
- (ii) the insured person
 - is yourself or your legally married spouse;
 - is a Singapore Citizen or Singapore Permanent Resident; and
 - is age between of 18 years old and 61 years old.

2. Sum Assured

The sum assured of this policy shall not exceed S\$200,000. You must pay the premium before the cover is effective.

3. Premium

The first premium amount is due and payable upon completion of the online application made through TRIBE by Income. The subsequent premiums are due on the same day in the following calendar months of this policy.

If any subsequent premium payment is not made, you will be given a grace period of 30 days. If the premium is not paid within the grace period, unless an extension of the grace period is agreed to by us, this policy will automatically terminate on the date where the grace period expires.

Please note that the premium rates for this product are not guaranteed. These rates may be adjusted based on future experience.

If we change the premium for this policy, we will write to your last email address registered in the TRIBE by Income online application, at least 30 days before the change is to take place, to notify you of the new premium.

4. Waiting Period

No benefits will be payable if the insured person is diagnosed as suffering from major cancer, heart attack of specified severity, coronary artery bypass surgery, angioplasty and other invasive treatment for coronary artery or other serious coronary artery disease within 90 days **from** the start date. For coronary artery bypass surgery and angioplasty and other invasive treatment for coronary artery, the date of diagnosis shall refer to the date of diagnosis of the medical condition that leads to the surgical procedure, and not to the date of surgical procedure.

5. Renewal

If we do not receive any request to cancel the cover, we will continue to collect the premium for the next policy term.

We will renew the cover only if we receive the premium for the next policy term. If the cover is renewed, we will provide the new terms and conditions for the next policy term before the start date of the next policy term.

6. Making Changes to This Policy

We may change the cover, benefit, premiums, terms and conditions of this policy from time to time by way of an endorsement. We may also discontinue the sale of any TRIBE-CI policy at any time in the future. We will write to you at your last email address registered with us in the TRIBE by Income online application, at least 30 days before the above change or discontinuance is to take place.

You may switch to a higher premium option which will take effect on the next premium due date by making your application through TRIBE by Income or email to hello.tribe@income.com.sg. You must disclose all material circumstances relating to the cover. Your application is subject to underwriting acceptance by us and your payment of all premiums due.

You may switch to a lower premium option which will take effect on the next premium due date by making your application through TRIBE by Income or email to hello.tribe@income.com.sg.

You may cancel this policy which will take effect on the next premium due date by making your application through TRIBE by Income or email to hello.tribe@income.com.sg.

7. Free-Look Period

We will give you 14 days from the date of issue of this policy to decide whether you want to continue with it. If you do not want to continue and there is no claim made under this policy, you may cancel this policy by

submitting your request through TRIBE by Income online application or email to hello.tribe@income.com.sg. You will get a refund of the premium paid, less any medical fees and other expenses such as payments for medical check-ups and medical reports incurred by us.

8. Cancellation

The policy ends immediately if any of the following events happens:

- if the insured person or you are no longer a Singapore Citizen or Singapore Permanent Resident;
- the policy term ends;
- the claim that is made under your policy is fraudulent;
- if we cancel this policy under section 3(i) - Prohibited Persons of the policy contract
- the insured person dies; or
- unless we are due to pay only part of the benefit for any of the critical illness, your policy will end immediately on the date the insured person is diagnosed by a registered medical practitioner as suffering from any of the critical illnesses in Appendix 2.

This will apply when the earliest of these events happens. There is no cash-in value available when the cover ends.

9. Exclusions

There are certain conditions under which no benefits will be payable. These are stated as exclusions in the policy conditions. You are advised to read the policy contract for the full list of exclusions. The following is a list of some of the exclusions for this plan. The exclusions for this plan include, but are not limited to, the following conditions:

- it is a case of fraud;
- you fail to pay a premium;
- the insured person has a material pre-existing condition;
- the claim arises from deliberate acts such as self-inflicted injuries, illnesses or attempted suicide;
- the claim arises from deliberate misuse of drugs or alcohol;
- the claim arises from acquired immunodeficiency syndrome (AIDS), AIDS-related complex or infection by human immunodeficiency virus (HIV), except as stated under HIV due to blood transfusion and occupationally acquired HIV; or
- the claim is excluded or not covered under the terms of the policy.

10. Claims

We must be told within six (6) months after the diagnosis or the event giving rise to the claim. You must tell us in writing, giving full details and providing the proof we need. You must give us the documents we need with the claim form. Please refer to our webpage for the claim procedures: <https://tribe.income.com.sg>.

You must provide adequate medical evidence and we may ask the insured person to be examined by a registered medical practitioner that we have appointed at your cost. Diagnosis of any critical illness must be supported by acceptable clinical, radiological, histological and laboratory evidence and confirmed by a registered medical practitioner.

Before we pay your claim, we will deduct all outstanding premium for this policy from any benefit payable.

The claim benefit is payable to you or your legal personal representative, as the case may be, if we receive satisfactory proof of the event we will pay the benefit for.

If a claim or any part of a claim is false or fraudulent, or if you use fraudulent methods to claim any benefit, we can do any or all of the following:

- we will not pay, and you will lose all benefits;

- we will end the policy;
- we will add extra terms and conditions; and/or
- we will take any action we consider is necessary.

11. Survival Period

No benefits under this policy shall be payable if the insured dies within seven (7) days of being diagnosed as suffering from a critical illness.

Disclaimer

This product summary does not form a part of the contract of insurance. It is only meant to be a simplified description of the product features which apply to this plan and does not explain the whole contract. The contents of this product summary may be different from the terms of cover we eventually issue. Please read the policy contract for the precise terms, conditions and exclusions. Only the terms, conditions and exclusions in the policy contract will be enforceable by you and us.

It is usually detrimental to replace an existing policy with a new one. A penalty may be imposed for early termination and the new policy may cost more or have less benefit at the same cost.

This policy is protected under the Policy Owners' Protection Scheme which is administered by the Singapore Deposit Insurance Corporation (SDIC). Coverage for your policy is automatic and no further action is required from you. For more information on the types of benefits that are covered under the scheme as well as the limits of coverage, where applicable, please contact Income or visit the GIA/LIA or SDIC web-sites (www.gia.org.sg or www.lia.org.sg or www.sdic.org.sg).

System Version Number: TRIBE/Critical Illness/ECI.202212.1

Appendix 1 Tables of cover and premiums

The premium rates for this plan are as set out below. Please note that the premium rates are inclusive of GST, not guaranteed and may be reviewed from time to time depending on our claims experience.

(i) **MALE NON-SMOKER**

Age Last Birthday (Years Old)	Sum Assured Amount (S\$) at S\$2.50 monthly premium for 1 year	Sum Assured Amount (S\$) at S\$5.00 monthly premium for 1 year	Sum Assured Amount (S\$) at S\$10.00 monthly premium for 1 year
18	34,800	69,600	139,200
19	33,600	67,200	134,400
20	32,100	64,200	128,400
21	31,200	62,400	124,800
22	30,000	60,000	120,000
23	30,000	60,000	120,000
24	30,000	60,000	120,000
25	30,000	60,000	120,000
26	30,000	60,000	120,000
27	28,200	56,400	112,800
28	26,400	52,800	105,600
29	24,300	48,600	97,200
30	22,200	44,400	88,800
31	20,700	41,400	82,800
32	19,200	38,400	76,800
33	17,400	34,800	69,600
34	15,900	31,800	63,600
35	14,400	28,800	57,600
36	13,200	26,400	52,800
37	11,700	23,400	46,800
38	10,200	20,400	40,800
39	9,000	18,000	36,000
40	7,800	15,600	31,200
41	6,900	13,800	27,600
42	6,000	12,000	24,000
43	5,400	10,800	21,600
44	5,100	10,200	20,400
45	4,500	9,000	18,000
46	4,200	8,400	16,800
47	3,900	7,800	15,600
48	3,600	7,200	14,400
49	3,300	6,600	13,200
50	3,000	6,000	12,000
51	2,700	5,400	10,800
52	2,400	4,800	9,600
53	2,100	4,200	8,400
54	2,100	4,200	8,400
55	1,800	3,600	7,200
56	1,800	3,600	7,200
57	1,500	3,000	6,000
58	1,500	3,000	6,000
59	1,200	2,400	4,800
60	1,200	2,400	4,800
61	900	1,800	3,600

(ii) **MALE SMOKER**

Age Last Birthday (Years Old)	Sum Assured Amount (S\$) at S\$2.50 monthly premium for 1 year	Sum Assured Amount (S\$) at S\$5.00 monthly premium for 1 year	Sum Assured Amount (S\$) at S\$10.00 monthly premium for 1 year
18	27,300	54,600	109,200
19	24,300	48,600	97,200
20	21,900	43,800	87,600
21	19,200	38,400	76,800
22	17,700	35,400	70,800
23	16,800	33,600	67,200
24	15,900	31,800	63,600
25	15,300	30,600	61,200
26	15,000	30,000	60,000
27	14,400	28,800	57,600
28	13,200	26,400	52,800
29	12,300	24,600	49,200
30	11,400	22,800	45,600
31	10,500	21,000	42,000
32	9,600	19,200	38,400
33	8,700	17,400	34,800
34	8,100	16,200	32,400
35	7,200	14,400	28,800
36	6,600	13,200	26,400
37	6,000	12,000	24,000
38	5,100	10,200	20,400
39	4,500	9,000	18,000
40	3,900	7,800	15,600
41	3,300	6,600	13,200
42	3,000	6,000	12,000
43	2,700	5,400	10,800
44	2,400	4,800	9,600
45	2,400	4,800	9,600
46	2,100	4,200	8,400
47	1,800	3,600	7,200
48	1,800	3,600	7,200
49	1,500	3,000	6,000
50	1,500	3,000	6,000
51	1,200	2,400	4,800
52	1,200	2,400	4,800
53	1,200	2,400	4,800
54	900	1,800	3,600
55	900	1,800	3,600
56	900	1,800	3,600
57	900	1,800	3,600
58	600	1,200	2,400
59	600	1,200	2,400
60	600	1,200	2,400
61	600	1,200	2,400

(ii) **FEMALE NON-SMOKER**

Age Last Birthday (Years Old)	Sum Assured Amount (S\$) at S\$2.50 monthly premium for 1 year	Sum Assured Amount (S\$) at S\$5.00 monthly premium for 1 year	Sum Assured Amount (S\$) at S\$10.00 monthly premium for 1 year
18	31,200	62,400	124,800
19	29,100	58,200	116,400
20	28,200	56,400	112,800
21	27,300	54,600	109,200
22	26,400	52,800	105,600
23	26,400	52,800	105,600
24	26,400	52,800	105,600
25	26,400	52,800	105,600
26	25,500	51,000	102,000
27	24,300	48,600	97,200
28	21,900	43,800	87,600
29	19,800	39,600	79,200
30	17,700	35,400	70,800
31	15,900	31,800	63,600
32	14,400	28,800	57,600
33	13,200	26,400	52,800
34	12,000	24,000	48,000
35	11,100	22,200	44,400
36	9,900	19,800	39,600
37	9,000	18,000	36,000
38	8,100	16,200	32,400
39	7,200	14,400	28,800
40	6,600	13,200	26,400
41	5,700	11,400	22,800
42	5,100	10,200	20,400
43	4,800	9,600	19,200
44	4,500	9,000	18,000
45	4,200	8,400	16,800
46	3,900	7,800	15,600
47	3,600	7,200	14,400
48	3,300	6,600	13,200
49	3,000	6,000	12,000
50	3,000	6,000	12,000
51	2,700	5,400	10,800
52	2,700	5,400	10,800
53	2,400	4,800	9,600
54	2,400	4,800	9,600
55	2,100	4,200	8,400
56	2,100	4,200	8,400
57	2,100	4,200	8,400
58	1,800	3,600	7,200
59	1,800	3,600	7,200
60	1,800	3,600	7,200
61	1,500	3,000	6,000

(iv) **FEMALE SMOKER**

Age Last Birthday (Years Old)	Sum Assured Amount (S\$) at S\$2.50 monthly premium for 1 year	Sum Assured Amount (S\$) at S\$5.00 monthly premium for 1 year	Sum Assured Amount (S\$) at S\$10.00 monthly premium for 1 year
18	24,300	48,600	97,200
19	21,300	42,600	85,200
20	18,900	37,800	75,600
21	16,800	33,600	67,200
22	15,600	31,200	62,400
23	14,400	28,800	57,600
24	13,800	27,600	55,200
25	12,900	25,800	51,600
26	12,900	25,800	51,600
27	12,000	24,000	48,000
28	10,800	21,600	43,200
29	9,900	19,800	39,600
30	8,700	17,400	34,800
31	7,800	15,600	31,200
32	7,200	14,400	28,800
33	6,600	13,200	26,400
34	6,000	12,000	24,000
35	5,400	10,800	21,600
36	5,100	10,200	20,400
37	4,500	9,000	18,000
38	3,900	7,800	15,600
39	3,600	7,200	14,400
40	3,300	6,600	13,200
41	3,000	6,000	12,000
42	2,700	5,400	10,800
43	2,400	4,800	9,600
44	2,100	4,200	8,400
45	2,100	4,200	8,400
46	1,800	3,600	7,200
47	1,800	3,600	7,200
48	1,800	3,600	7,200
49	1,500	3,000	6,000
50	1,500	3,000	6,000
51	1,500	3,000	6,000
52	1,200	2,400	4,800
53	1,200	2,400	4,800
54	1,200	2,400	4,800
55	1,200	2,400	4,800
56	900	1,800	3,600
57	900	1,800	3,600
58	900	1,800	3,600
59	900	1,800	3,600
60	900	1,800	3,600
61	900	1,800	3,600

Appendix 2 List of Critical Illnesses

The Life Insurance Association Singapore (LIA) has standard Definitions for 37 severe-stage Critical Illnesses (Version 2019). These Critical Illnesses fall under Version 2019. You may refer to www.lia.org.sg for the standard Definitions (Version 2019).

Any one of the following is a critical illness:

1 Major cancer

A malignant tumour positively diagnosed with histological confirmation and characterized by the uncontrolled growth of malignant cells with invasion and destruction of normal tissue.

The term Major Cancer includes, but is not limited to leukemia, lymphoma and sarcoma.

Major Cancer diagnosed on the basis of finding tumour cells and/or tumour-associated molecules in blood, saliva, faeces, urine or any other bodily fluid in the absence of further definitive and clinically verifiable evidence does not meet the above definition.

For the above definition, the following are excluded:

- All tumours which are histologically classified as any of the following:
 - Pre-malignant;
 - Non-invasive;
 - Carcinoma-in-situ (Tis) or Ta;
 - Having borderline malignancy;
 - Having any degree of malignant potential;
 - Having suspicious malignancy;
 - Neoplasm of uncertain or unknown behaviour; or
 - All grades of dysplasia, squamous intraepithelial lesions (HSIL and LSIL) and intra epithelial neoplasia;
- Any non-melanoma skin carcinoma, skin confined primary cutaneous lymphoma and dermatofibrosarcoma protuberans unless there is evidence of metastases to lymph nodes or beyond;
- Malignant melanoma that has not caused invasion beyond the epidermis;
- All Prostate cancers histologically described as T1N0M0 (TNM Classification) or below; or Prostate cancers of another equivalent or lesser classification;
- All Thyroid cancers histologically classified as T1N0M0 (TNM Classification) or below;
- All Neuroendocrine tumours histologically classified as T1N0M0 (TNM Classification) or below;
- All tumours of the Urinary Bladder histologically classified as T1N0M0 (TNM Classification) or below;
- All Gastro-Intestinal Stromal tumours histologically classified as Stage I or IA according to the latest edition of the AJCC Cancer Staging Manual, or below;
- Chronic Lymphocytic Leukaemia less than RAI Stage 3;
- All bone marrow malignancies which do not require recurrent blood transfusions, chemotherapy, targeted cancer therapies, bone marrow transplant, haematopoietic stem cell transplant or other major interventionist treatment; and
- All tumours in the presence of HIV infection.

2 Heart attack of specified severity

Death of heart muscle due to ischaemia, that is evident by at least three of the following criteria proving the occurrence of a new heart attack:

- History of typical chest pain;

- New characteristic electrocardiographic changes; with the development of any of the following: ST elevation or depression, T wave inversion, pathological Q waves or left bundle branch block;
- Elevation of the cardiac biomarkers, inclusive of CKMB above the generally accepted normal laboratory levels or Cardiac Troponin T or I at 0.5ng/ml and above;
- Imaging evidence of new loss of viable myocardium or new regional wall motion abnormality. The imaging must be done by Cardiologist specified by Income.

For the above definition, the following are excluded:

- Angina;
- Heart attack of indeterminate age; and
- A rise in cardiac biomarkers or Troponin T or I following an intra-arterial cardiac procedure including, but not limited to, coronary angiography and coronary angioplasty.

Explanatory note: 0.5ng/ml = 0.5ug/L = 500pg/ml

3 Stroke with permanent neurological deficit

A cerebrovascular incident including infarction of brain tissue, cerebral and subarachnoid haemorrhage, intracerebral embolism and cerebral thrombosis resulting in permanent neurological deficit. This diagnosis must be supported by all of the following conditions:

- Evidence of permanent clinical neurological deficit confirmed by a neurologist at least 6 weeks after the event; and
- Findings on Magnetic Resonance Imaging, Computerised Tomography, or other reliable imaging techniques consistent with the diagnosis of a new stroke.

The following are excluded:

- Transient Ischaemic Attacks;
- Brain damage due to an accident or injury, infection, vasculitis, and inflammatory disease;
- Vascular disease affecting the eye or optic nerve;
- Ischaemic disorders of the vestibular system; and
- Secondary haemorrhage within a pre-existing cerebral lesion.

4 Coronary artery by-pass surgery

The actual undergoing of open-chest surgery or Minimally Invasive Direct Coronary Artery Bypass surgery to correct the narrowing or blockage of one or more coronary arteries with bypass grafts. This diagnosis must be supported by angiographic evidence of significant coronary artery obstruction and the procedure must be considered medically necessary by a consultant cardiologist.

Angioplasty and all other intra-arterial, catheter based techniques, 'keyhole' or laser procedures are excluded.

5 End stage kidney failure

Chronic irreversible failure of both kidneys requiring either permanent renal dialysis or kidney transplantation.

6 Irreversible aplastic anaemia

Chronic persistent and irreversible bone marrow failure, confirmed by biopsy, which results in anaemia, neutropenia and thrombocytopenia requiring treatment with at least one of the following:

- Blood product transfusion;
- Bone marrow stimulating agents;

- Immunosuppressive agents; or
- Bone marrow or haematopoietic stem cell transplantation.

The diagnosis must be confirmed by a haematologist.

7 End stage lung disease

End stage lung disease, causing chronic respiratory failure. This diagnosis must be supported by evidence of all of the following:

- FEV1 test results which are consistently less than 1 litre;
- Permanent supplementary oxygen therapy for hypoxemia;
- Arterial blood gas analyses with partial oxygen pressures of 55mmHg or less ($\text{PaO}_2 \leq 55\text{mmHg}$); and
- Dyspnea at rest.

The diagnosis must be confirmed by a respiratory physician.

8 End stage liver failure

End stage liver failure as evidenced by all of the following:

- Permanent jaundice;
- Ascites; and
- Hepatic encephalopathy.

Liver disease secondary to alcohol or drug abuse is excluded.

9 Coma

A coma that persists for at least 96 hours. This diagnosis must be supported by evidence of all of the following:

- No response to external stimuli for at least 96 hours;
- Life support measures are necessary to sustain life; and
- Brain damage resulting in permanent neurological deficit which must be assessed at least 30 days after the onset of the coma.

For the above definition, medically induced coma and coma resulting directly from alcohol or drug abuse are excluded.

10 Deafness (Irreversible loss of hearing)

Total and irreversible loss of hearing in both ears as a result of illness or accident. This diagnosis must be supported by audiometric and sound-threshold tests provided and certified by an Ear, Nose, Throat (ENT) specialist.

Total means “the loss of at least 80 decibels in all frequencies of hearing”.

Irreversible means “cannot be reasonably restored to at least 40 decibels by medical treatment, hearing aid and/or surgical procedures consistent with the current standard of the medical services available in Singapore after a period of 6 months from the date of intervention.”

11 Open chest heart valve surgery

The actual undergoing of open-heart surgery to replace or repair heart valve abnormalities. The diagnosis of heart valve abnormality must be supported by cardiac catheterization or echocardiogram and the procedure must be considered medically necessary by a consultant cardiologist.

12 Irreversible loss of speech

Total and irreversible loss of the ability to speak as a result of injury or disease to the vocal cords. The inability to speak must be established for a continuous period of 12 months. This diagnosis must be supported by medical evidence furnished by an Ear, Nose, Throat (ENT) specialist. All psychiatric related causes are excluded.

13 Major burns

Third degree (full thickness of the skin) burns covering at least 20% of the surface of the insured's body.

14 Major organ / bone marrow transplantation

The receipt of a transplant of:

- Human bone marrow using haematopoietic stem cells preceded by total bone marrow ablation; or
- One of the following human organs: heart, lung, liver, kidney, pancreas, that resulted from irreversible end stage failure of the relevant organ.

Other stem cell transplants are excluded.

15 Multiple sclerosis

The definite diagnosis of Multiple Sclerosis, and must be supported by all of the following:

- Investigations which unequivocally confirm the diagnosis to be Multiple Sclerosis; and
- Multiple neurological deficits which occurred over a continuous period of at least 6 months.

Other causes of neurological damage such as systemic lupus erythematosus (SLE) and HIV are excluded.

16 Muscular dystrophy

The unequivocal diagnosis of muscular dystrophy must be made by a consultant neurologist. The condition must result in the inability of the insured to perform (whether aided or unaided) at least 3 of the 6 "Activities of Daily Living" for a continuous period of at least 6 months.

For the purpose of this definition, "aided" shall mean with the aid of special equipment, device and/or apparatus and not pertaining to human aid.

17 Idiopathic parkinson's disease

The unequivocal diagnosis of idiopathic Parkinson's Disease by a consultant neurologist. This diagnosis must be supported by all of the following conditions:

- The disease cannot be controlled with medication; and

- Inability of the insured to perform (whether aided or unaided) at least 3 of the 6 “Activities of Daily Living” for a continuous period of at least 6 months.

For the purpose of this definition, “aided” shall mean with the aid of special equipment, device and/or apparatus and not pertaining to human aid.

18 Open chest surgery to aorta

The actual undergoing of major surgery to repair or correct an aneurysm, narrowing, obstruction or dissection of the aorta through surgical opening of the chest or abdomen. For the purpose of this definition, aorta shall mean the thoracic and abdominal aorta but not its branches.

Surgery performed using only minimally invasive or intra-arterial techniques are excluded.

19 Alzheimer’s disease / severe dementia

Deterioration or loss of cognitive function as confirmed by clinical evaluation and imaging tests, arising from Alzheimer’s disease or irreversible organic disorders, resulting in significant reduction in mental and social functioning requiring the continuous supervision of the insured. This diagnosis must be supported by the clinical confirmation of an appropriate consultant and supported by Income’s appointed **registered medical practitioner**.

The following are excluded:

- Non-organic diseases such as neurosis and psychiatric illnesses; and
- Alcohol related brain damage.

20 Fulminant hepatitis

A submassive to massive necrosis of the liver by the Hepatitis virus, leading precipitously to liver failure. This diagnosis must be supported by all of the following:

- Rapid decreasing of liver size as confirmed by abdominal ultrasound;
- Necrosis involving entire lobules, leaving only a collapsed reticular framework;
- Rapid deterioration of liver function tests;
- Deepening jaundice; and
- Hepatic encephalopathy.

21 Motor neurone disease

Motor neurone disease characterised by progressive degeneration of corticospinal tracts and anterior horn cells or bulbar efferent neurones which include spinal muscular atrophy, progressive bulbar palsy, amyotrophic lateral sclerosis and primary lateral sclerosis. This diagnosis must be confirmed by a neurologist as progressive and resulting in permanent neurological deficit.

22 Primary pulmonary hypertension

Primary Pulmonary Hypertension with substantial right ventricular enlargement confirmed by investigations including cardiac catheterisation, resulting in permanent physical impairment of at least Class IV of the New York Heart Association (NYHA) Classification of Cardiac Impairment.

The NYHA Classification of Cardiac Impairment:

- Class I: No limitation of physical activity. Ordinary physical activity does not cause undue fatigue, dyspnea, or anginal pain.
- Class II: Slight limitation of physical activity. Ordinary physical activity results in symptoms.
- Class III: Marked limitation of physical activity. Comfortable at rest, but less than ordinary activity causes symptoms.
- Class IV: Unable to engage in any physical activity without discomfort. Symptoms may be present even at rest.

23 HIV due to blood transfusion and occupationally acquired HIV

(A) Infection with the Human Immunodeficiency Virus (HIV) through a blood transfusion, provided that all of the following conditions are met:

- The blood transfusion was medically necessary or given as part of a medical treatment;
- The blood transfusion was received in Singapore after the **cover start date** of the **first policy**; and
- The source of the infection is established to be from the Institution that provided the blood transfusion and the Institution is able to trace the origin of the HIV tainted blood.

(B) Infection with the Human Immunodeficiency Virus (HIV) which resulted from an accident occurring after the **cover start date** of the **first policy** whilst the insured was carrying out the normal professional duties of his or her occupation in Singapore, provided that all of the following are proven to Income's satisfaction:

- Proof that the accident involved a definite source of the HIV infected fluids;
- Proof of sero-conversion from HIV negative to HIV positive occurring during the 180 days after the documented accident. This proof must include a negative HIV antibody test conducted within 5 days of the accident; and
- HIV infection resulting from any other means including sexual activity and the use of intravenous drugs is excluded.

This benefit is only payable when the occupation of the insured is a medical practitioner, housemen, medical student, state registered nurse, medical laboratory technician, dentist (surgeon and nurse) or paramedical worker, working in medical centre or clinic (in Singapore).

This benefit will not apply under either section A or B where a cure has become available prior to the infection. "Cure" means any treatment that renders the HIV inactive or non-infectious.

24 Benign brain tumour

Benign brain tumour means a non-malignant tumour located in the cranial vault and limited to the brain, meninges or cranial nerves where all of the following conditions are met:

- It has undergone surgical removal or, if inoperable, has caused a permanent neurological deficit; and
- Its presence must be confirmed by a neurologist or neurosurgeon and supported by findings on Magnetic Resonance Imaging, Computerised Tomography, or other reliable imaging techniques.

The following are excluded:

- Cysts;
- Abscess;
- Angioma;
- Granulomas;
- Vascular Malformations;
- Haematomas; and
- Tumours of the pituitary gland, spinal cord and skull base.

25 Severe Encephalitis

Severe inflammation of brain substance (cerebral hemisphere, brainstem or cerebellum) and resulting in permanent neurological deficit which must be documented for at least 6 weeks. This diagnosis must be certified by a consultant neurologist, and supported by any confirmatory diagnostic tests.

Encephalitis caused by HIV infection is excluded.

26 Severe bacterial meningitis

Bacterial infection resulting in severe inflammation of the membranes of the brain or spinal cord resulting in significant, irreversible and permanent neurological deficit. The neurological deficit must persist for at least 6 weeks. This diagnosis must be confirmed by:

- The presence of bacterial infection in cerebrospinal fluid by lumbar puncture; and
- A consultant neurologist.

Bacterial Meningitis in the presence of HIV infection is excluded.

27 Angioplasty & other invasive treatment for coronary artery

The actual undergoing of balloon angioplasty or similar intra-arterial catheter procedure to correct a narrowing of minimum 60% stenosis of one or more major coronary arteries as shown by angiographic evidence. The revascularisation must be considered medically necessary by a consultant cardiologist.

Coronary arteries herein refer to left main stem, left anterior descending, circumflex and right coronary artery.

Payment under this condition is limited to 10% of the sum assured under this policy subject to a S\$25,000 maximum sum payable. This benefit is payable once only and shall be deducted from the amount of this contract, thereby reducing the amount of sum assured which may be payable herein.

Diagnostic angiography is excluded.

28 Blindness (Irreversible loss of sight)

Permanent and irreversible loss of sight in both eyes as a result of illness or accident to the extent that even when tested with the use of visual aids, vision is measured at 6/60 or worse in both eyes using a Snellen eye chart or equivalent test, or visual field of 20 degrees or less in both eyes. The blindness must be confirmed by an ophthalmologist.

The blindness must not be correctable by surgical procedures, implants or any other means.

29 Major head trauma

Accidental head injury resulting in permanent neurological deficit to be assessed no sooner than 6 weeks from the date of the accident. This diagnosis must be confirmed by a consultant neurologist and supported by relevant findings on Magnetic Resonance Imaging, Computerised Tomography, or other reliable imaging techniques. "Accident" means an event of violent, unexpected, external, involuntary and visible nature which is independent of any other cause and is the sole cause of the head Injury.

The following are excluded:

- Spinal cord injury; and
- Head injury due to any other causes.

30 Paralysis (Irreversible loss of use of limbs)

Total and irreversible loss of use of at least 2 entire limbs due to injury or disease persisting for a period of at least 6 weeks and with no foreseeable possibility of recovery. This condition must be confirmed by a consultant neurologist.

Self-inflicted injuries are excluded.

31 Terminal illness

The conclusive diagnosis of an illness that is expected to result in the death of the insured within 12 months. This diagnosis must be supported by a specialist and confirmed by Income's appointed registered medical practitioner.

Terminal illness in the presence of HIV infection is excluded.

32 Progressive scleroderma

A systemic collagen-vascular disease causing progressive diffuse fibrosis in the skin, blood vessels and visceral organs. This diagnosis must be unequivocally confirmed by a consultant rheumatologist and supported by biopsy or equivalent confirmatory test, and serological evidence, and the disorder must have reached systemic proportions to involve the heart, lungs or kidneys.

The following are excluded:

- Localised scleroderma (linear scleroderma or morphea);
- Eosinophilic fasciitis; and
- CREST syndrome.

33 Persistent Vegetative State (Apallic syndrome)

Universal necrosis of the brain cortex with the brainstem intact. This diagnosis must be definitely confirmed by a consultant neurologist holding such an appointment at an approved hospital. This condition has to be medically documented for at least one month.

34 Systemic lupus erythematosus with lupus nephritis

The unequivocal diagnosis of Systemic Lupus Erythematosus (SLE) based on recognised diagnostic criteria and supported with clinical and laboratory evidence. In respect of this contract, systemic lupus erythematosus will be restricted to those forms of systemic lupus erythematosus which involve the kidneys (Class III to Class VI Lupus Nephritis, established by renal biopsy, and in accordance with the RPS/ISN classification system). The final diagnosis must be confirmed by a certified doctor specialising in Rheumatology and Immunology.

The RPS/ISN classification of lupus nephritis:

Class I:	Minimal mesangial lupus nephritis
Class II:	Messangial proliferative lupus nephritis
Class III:	Focal lupus nephritis (active and chronic; proliferative and sclerosing)
Class IV:	Diffuse lupus nephritis (active and chronic; proliferative and sclerosing; segmental and global)
Class V:	Membranous lupus nephritis
Class VI:	Advanced sclerosis lupus nephritis

35 Other serious coronary artery disease

The narrowing of the lumen of at least one coronary artery by a minimum of 75% and of two others by a minimum of 60%, as proven by invasive coronary angiography, regardless of whether or not any form of coronary artery surgery has been performed.

Diagnosis by Imaging or non-invasive diagnostic procedures such as CT scan or MRI does not meet the confirmatory status required by the definition.

Coronary arteries herein refer to left main stem, left anterior descending, circumflex and right coronary artery. The branches of the above coronary arteries are excluded.

36 Poliomyelitis

The occurrence of Poliomyelitis where the following conditions are met:

- Poliovirus is identified as the cause,
- Paralysis of the limb muscles or respiratory muscles must be present and persist for at least 3 months.

The diagnosis must be confirmed by a consultant neurologist or specialist in the relevant medical field.

37 Loss of independent existence

A condition as a result of a disease, illness or injury whereby the insured is unable to perform (whether aided or unaided) at least 3 of the 6 “Activities of Daily Living”, for a continuous period of 6 months. This condition must be confirmed by Income’s appointed registered medical practitioner.

Non-organic diseases such as neurosis and psychiatric illnesses are excluded.

For the purpose of this definition, “aided” shall mean with the aid of special equipment, device and/or apparatus and not pertaining to human aid.

Others

The following two terms can be found in some of the above definitions, and their meanings are as follows:

1 Permanent neurological deficit

Permanent means expected to last throughout the lifetime of the insured.

Permanent neurological deficit means symptoms of dysfunction in the nervous system that are present on clinical examination and expected to last throughout the lifetime of the insured. Symptoms that are covered include numbness, paralysis, localized weakness, dysarthria (difficulty with speech), aphasia (inability to speak), dysphagia (difficulty swallowing), visual impairment, difficulty in walking, lack of coordination, tremor, seizures, dementia, delirium and coma.

2 Activities of Daily Living (ADLs)

The six "Activities of Daily Living" are:

- i. Washing - the ability to wash in the bath or shower (including getting into and out of the bath or shower) or wash satisfactorily by other means;
- ii. Dressing - the ability to put on, take off, secure and unfasten all garments and, as appropriate, any braces, artificial limbs or other surgical appliances;
- iii. Transferring - the ability to move from a bed to an upright chair or wheelchair and vice versa;
- iv. Mobility - the ability to move indoors from room to room on level surfaces;
- v. Toileting - the ability to use the lavatory or otherwise manage bowel and bladder functions so as to maintain a satisfactory level of personal hygiene;
- vi. Feeding - the ability to feed oneself once food has been prepared and made available.